SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION 1406434

OMB APPROVAL 3235-0076 OMB Number: Expires: Estimated average burden hours per response.....16.00

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							
<u>'</u>							

	·	
Name of Offering Check if this is an amendment and name has changed, and indicate change.		
Cache Capital Corporation June 2007 Private Placement		1) 1 ((1 (1) 1) 1 (1) 1 1 1 1 1 1 1 1 1
Filing Under (Check box(es) that apply):	4(6) ULOE	
Type of Filing: New Filing		
A. BASIC IDENTIFICATION DATA		07070388
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)		
Cache Capital Corporation		
Address of Executive Offices (Number and Street, City, State, Zip Co	de) Telephone	Number (Including Area Code)
175 South Main Street, Suite 1210, Salt Lake City, Utah 84111	(801) 530-05	522
Address of Principal Business Operations (Number and Street, City, State, Zip Co (if different from Executive Offices)	ode) Telephone	Number (Including Area Code)
Brief Description of Business		
The company is engaged in the business of making short term loans and factoring according	ounts receivable, i	nvoices and other items.
Type of Business Organization		
	ner (please specify):	PROCESSED
Month Year		44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Actual or Estimated Date of Incorporation or Organization: 09 06 Actual	Estimated	JUL 1 3 2007
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for		THOMSON
CN for Canada; FN for other foreign jurisdiction)		/EINIANICIAI
GENERAL INSTRUCTIONS		

FORM D

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			. A. BASIC IDI	ENŢĮ	FICATION DATA			_: .	
2. Enter the information re	quested for the fo	llowin	ıg:						
Each promoter of	the issuer, if the is:	suer h	as been organized w	ithin	the past five years;				
Each beneficial ow	ner having the pow	er to	vote or dispose, or di	rect th	e vote or disposition	of, 10	% or more o	fa clas	s of equity securities of the issue
			-		rate general and mar				
	nanaging partner o				6				,
		, p							
Check Box(es) that Apply:	✓ Promoter	Ø	Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i T. Kent Rainey	f individual)								
Business or Residence Addre 175 South Main Street, S	,		t, City, State, Zip Co City, UT 84111	de)					
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i Tyler K. Rainey	f individual)							•	
Business or Residence Addre	ss (Number and	Street	t, City, State, Zip Co	de)					
175 South Main Street, St	-			,					
Check Box(es) that Apply:	✓ Promoter	Ø	Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i Vicki L. Rainey	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
175 South Main Street, S	uite 1210, Salt L	ake (City, UT 84111						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)		<u> </u>			
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)	· · · · · · · · · · · · · · · · · · ·		· 10		
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	de)					
	(Use blar	nk she	et, or copy and use a	additio	onal copies of this sh	ieet, a	s necessary))	

	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		B. I	NFORMAT	ION ABOU	T OFFERI	NG		,		
l. H	oc the	icovar col	d, or does tl	ha issuar i	ntand to se	il to non a	ooraditad i	nuectore i	thic offer	ina?		Yes	No
т. п	as the	155461 501	u, or does n							=	••••••		X
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?								\$ <u>2.50</u>	∞ ≭				
		inks wo										Yes	No
			permit join									R	
co If or	ommis a pers r states	sion or sim on to be lis s, list the na	tion request illar remune sted is an ass ame of the b , you may s	ration for s sociated pe roker or de	solicitation erson or age ealer. If me	of purchas ent of a brol ore than fiv	ers in conn ker or deale e (5) persoi	ection with r registere ns to be list	sales of se d with the S ted are asso	curities in t SEC and/or	he offering. with a state		
Full N None		Last name	first, if indi	ividual)		,							
Busine	ess or	Residence	Address (N	lumber and	d Street, C	ity, State, 7	Zip Code)				·		
		1 15											
Name	of Ass	ociated Bi	roker or De	aler									
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(C	Check	"All States	s" or check	individual	States)			•••••				Al	l States
N	AL AT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full N	ame (l	ast name	first, if indi	vidual)									-
Busine	ss or	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Name (of Ass	ociated Br	oker or Dea	aler									
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(C	Check '	"All States	s" or check	individual	States)	•••••	•••••••	***************************************			•••••	□ Al	l States
M	L T T	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Na	ame (I	ast name	first, if indi	vidual)		,							
Busine	ss or	Residence	Address (N	Jumber an	d Street, C	ity, State, 2	Zip Code)						
Name	of Ass	ociated De	oker or Dea								···-	<u>,</u>	
	01 733	ociated bi	OKCI OI DCA	1101									
			Listed Has										States
(C	леск	An States	" or check	inaiviauzi	States)		*************		***************************************		***************************************	∐ A11	States
M	L IT IT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

••	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	S	_ s
	Equity	125,000.00	<u>\$_117,500.00</u>
	Convertible Securities (including warrants)	<u> </u>	<u> </u>
	Partnership Interests	S	<u> </u>
	Other (Specify)		
	Total	125,000.00	§ 117,500.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	23	§_117,500.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	23	\$ 117,500.00
	Answer also in Appendix. Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	Z	\$_4,500.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Misc. Copying Etc.		\$ 500.00
	Total		\$ 5,000.00

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This differer	ice is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross pre each of the purposes shown. If the amount for an check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Part	y purpose is not known, if the payments listed must of	furnish an estimate and equal the adjusted gross		
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		[\$	_ 🗆 \$
	Purchase of real estate	••••••••••••	[
	Purchase, rental or leasing and installation of mad and equipment		[s	. 🗆 \$
	Construction or leasing of plant buildings and fac	ilities	[s	S
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	-	-] \$	
	Repayment of indebtedness		•	_	
	Working capital		•		
	Other (specify): Short Term Loans and Factorin	ng Arrangements	[
	Reimburse Officers for office rent and office exp	penses	[2 \$ 14,400.00	\$
	Column Totals				
	Total Payments Listed (column totals added)			□ \$ <u></u> 12	20,000.00
		D. FEDERAL SIGNA	TURE		
gı	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities	and Exchange Commis	sion, upon writte	
sı	ner (Print or Type)	Signature	1	Date	
a	che Capital Corporation	7 K. S. C.)	7-10-07	
aı	ne of Signer (Print or Type)	Title of Signer (Print or	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		
	ent Rainey	President			

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Cache Capital Corporation	7 King Raine	7-10-07
Name (Print or Type)	Title (Print or Type)	
T. Kent Rainey	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX l 2 3 5 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes Investors Investors Yes No No Amount Amount AL AK AZAR $\mathsf{C}\mathsf{A}$ CO CTDE DC FL GA HΙ ID IL INIΑ KS KY LA ME MDMA ΜI MNMS

APPENDIX											
1	Intend to non-a investor	2 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МО											
МТ											
NE											
NV							 				
ИН											
ŊJ											
NM											
NY											
NC									ar benduk ana a manang a cad		
ND											
он											
ок											
OR		J									
PA											
RI	***************************************						:				
SC											
SD									1		
TN											
TX	Le company company								Andrewson and		
UT		×	Common Stock	23	\$117,500.0				×		
VT											
VA											
WA									1		
wv							-				
WI											

	APPENDIX									
1		2	3		4			5		
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			under St (if yes, explan waiver	lification ate ULOE , attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY									and the first of t	
PR										

